Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention COMPOSITION AND METHOD OF TREATING AKTHRIES			
As the below named inventor(s), I/we declare that:			
This declaration is directed to:			
The attached application, or			
Application No, filed on,			
as amended on(if applicable);			
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;			
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;			
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.			
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.			
FULL NAME OF INVENTOR(S)			
Inventor one: EDWARD J. PETRUS			
Signature: Citizen of: USA			
Inventor two:			
Signature: Citizen of:			
Inventor three:			
Signature: Citizen of:			
Inventor four:			

 PTO/SB/09 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Paţent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

-
I
T.
Paris,
Harry Harry
Œ
-
PU)
I FI
Ty.

	STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(b))INDEPENDENT INVENTOR	Docket Number (Optional)		
	Applicant, Patentee, or Identifier: Enwarn J. Pe	TRUS		
	Application or Patent No.: EJP-2002-2			
	Filed or Issued: 02/05/02			
	Title: COMPOSITION AND METHOD OF TREATING ANTHRITY			
	As a below named inventor, I hereby state that I qualify as an indep for purposes of paying reduced fees to the Patent and Trademark	pendent inventor as defined in 37 CFR 1.9(c) Office described in:		
	the specification filed herewith with title as listed above.			
	the application identified above.			
	the patent identified above.			
	I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).			
	Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:			
	X No such person, concern, or organization exists.			
Each such person, concern, or organization is listed below.				
Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27) I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))				
	NAME OF INVENTOR NAME OF INVENTOR Signature of inventor Signature of inventor	NAME OF INVENTOR Signature of inventor		
	03/05/02 Date Date	Date		
		Dute		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231